

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	AMD	13	09/19/01
O.I.P.E. CLASSIFIER			9/27
FORMALITY REVIEW	bit	801	10/3/01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	4/14/01
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12	✓
13	✓
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15	✓
16	0
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18	✓
19	✓
20	0
21	✓
22	0
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27	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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052-15-01